

U.S. Department of Justice  
United States Marshals Service

Case: 1:19-cv-03877 Document #: 12 Filed: 10/10/19 Page 1 of 1 PageID #: 38

PROCESS RECEIPT AND RETURN  
See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

PLAINTIFF CHARLES BOCOCK	COURT CASE NUMBER 19C 3877
DEFENDANT THOMAS J. DART	TYPE OF PROCESS SUMMONS Waiver
SERVE { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN THOMAS J. DART, COOK COUNTY SHERIFF	
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) DALEY CENTER, 50 W. WASHINGTON, ROOM 704, CHICAGO, IL, 60602	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: CHARLES BOCOCK #20180503001 PO BOX 089002 CHICAGO, IL 60608	
Number of process to be served with this Form - 285	
Number of parties to be served in this case	
Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold  
FILED  
OCT 10 2019

THOMAS G. BRUTON CLERK, U.S. DISTRICT COURT	
Signature of Attorney or other Originator requesting service on behalf of: C	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT
TELEPHONE NUMBER N/A	DATE 9/25/19

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1/1	District of Origin No. 24	District to Serve No. 24	Signature of Authorized USMS Deputy or Clerk P1D	Date 10/03/19
---	----------------------	------------------------------	-----------------------------	---	------------------

I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service 10/09/19
	Time 421 pm
	Signature of U.S. Marshal or Deputy [Signature]

Service Fee 65.00	Total Mileage Charges (including endeavors) —	Forwarding Fee —	Total Charges 65.00	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
----------------------	--	---------------------	------------------------	------------------	--------------------------------	------------------

REMARKS: 10/03 emailed Waiver

10/09 Waiver of Service Accepted  
9:18 PM OCT 10 2019

PRIOR EDITIONS  
MAY BE USED

1. CLERK OF THE COURT

FORM USM-285 (Rev. 12/15/80)  
(Instructions Rev. 12/08)